

Request for Michigan Tax Return Information

Issued under authority of P.A. 122 of 1941, as amended.

PART 1: REQUESTING AGENCY INFORMATION			
Name of Government Unit Requesting Information		Telephone Number	
Address (Number and Street)	City	State	ZIP Code
We are requesting information per MCL 205.28 (1)(f) and an agreement between the agency named above and the Michigan Department of Treasury. Please provide the information on the individual or business named below.			
PART 2: INDIVIDUAL TAXPAYER			
Taxpayer Last Name	First Name	MI	Social Security Number
Secondary Taxpayer Last Name	First Name	MI	Social Security Number
Address (Street)	City	State	ZIP Code
PART 3: BUSINESS TAXPAYER			
Business or Corporation Name		Federal Employer ID No. (FEIN) or Michigan ID No.	
Address (Street)	City	State	ZIP Code
Names of Owners or Partners			
<input type="checkbox"/> Check this box if the information must be certified by the Disclosure Officer and is expected to be presented in court.			
Type of tax return or tax return information needed: <input type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Other:		For tax years: 	
Specify other information needed:		Reason for request:	
<p>I declare that I am authorized to request and receive the above information under the exchange agreement between the Michigan Department of Treasury and the agency named above (Government Unit).</p> <p>I understand that any Michigan Department of Treasury tax returns or tax return information made available to me will not be divulged or made known in any manner to any person except as may be necessary in the performance of my official duties. Access to Treasury information is allowed on a need-to-know basis to perform my official duties. I further understand that under the Michigan Revenue Act, MCL 205.28(1)(f) I may not willfully browse any return or information contained in a return. Browsing is defined as examining a return or return information acquired by a person or another person without authorization or without a need to know the information to perform official duties.</p> <p>Agency Discipline: Treasury may pursue internal sanctions for unauthorized accessing, browsing, or disclosing state or federal tax returns or tax return information, regardless of whether criminal prosecution is taken.</p> <p>Michigan Penalties: MCL 205.28(1)(f) provides that you may not willfully browse any Michigan tax return or information contained in a return. Browsing is defined as examining a return or return information acquired without authorization and without a need to know the information to perform official duties. Violators of §28(1)(f) are guilty of a felony and subject to fines of \$5,000 or imprisonment for five years, or both per the Michigan Revenue Act, MCL 205.28(2). State employees will be discharged from state service upon conviction.</p> <p>Any person who violates any other provision of the Revenue Act, MCL 205.1, et seq., or any statute administered under the Revenue Act, will be guilty of a misdemeanor and fined \$1,000 or imprisoned for up to one year, or both, MCL 205.27(4).</p> <p>This form and any attached return information must be returned to your department liaison in charge of tracking, receiving and destroying Michigan tax return information.</p>			
Signature of Employee Initiating Request		Date	Signature of Agency Head/Designee
Print Name of Employee Initiating Request		Print Name of Agency Head/Designee	
PART 4: TO BE COMPLETED BY TREASURY DISCLOSURE OFFICER			
<input type="checkbox"/> 1. The attached information is furnished for tax year(s) _____.			
<input type="checkbox"/> 2. No record of filing a return/credit for tax year(s) _____.			
<input type="checkbox"/> 3. No tax record exists for the previous five years under the account number provided.			
<input type="checkbox"/> 4. The account number provided is being used by another taxpayer.			
<input type="checkbox"/> 5. We are unable to locate a business tax record under the name(s) provided. Submit an FEIN or Michigan ID number for a more thorough search.			
<input type="checkbox"/> 6. Other _____.			
Disclosure Officer		Date	Allow 60 days to process your request.

Send this form to: Disclosure Officer, Michigan Department of Treasury, Technical Services Division, Disclosure Unit, 430 W. Allegan Street, Lansing, MI 48922.